



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Tatsuo Itabashi  
Appl. No.: 09/845,948  
Conf. No.: 3223  
Filed: April 30, 2001  
Title: INFORMATION PROVIDING SYSTEM INFORMATION PROVIDING  
METHOD AND MEDIUM THEREOF  
Art Unit: 2132  
Examiner: Jung W. Kim  
Docket No.: 112857-222

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT**

Sir:

In response to the Final Office Action dated March 18, 2005, please amend the above-identified patent application as follows:

**Amendments to the Specification** begin on page 2 of this paper.

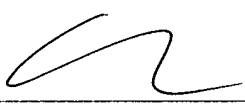

**Amendments to the Claims** are reflected in the listing of claims which begins on page 3 of this paper.

**Remarks** begin on page 16 of this paper.

**Amendments to the Specification:**

Please replace the Title with the following rewritten Title:

INFORMATION PROVIDING SYSTEM ~~INFORMATION PROVIDING~~ UTILIZING  
IC CARDS AND METHOD AND MEDIUM THEREOF

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b> Applicant(s): <b>Tatsuo Itabashi</b>				Docket No. <b>112857-222</b>	
Application No. <b>09/845,948</b>	Filing Date <b>April 30, 2000</b>	Examiner <b>Jung W. Kim</b>	Customer No. <b>29175</b>	Group Art Unit <b>2132</b>	Confirmation No. <b>3323</b>
Invention: <b>INFORMATION PROVIDING SYSTEM INFORMATION PROVIDING METHOD AND MEDIUM THEREOF</b>					
<b>COMMISSIONER FOR PATENTS:</b>  Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	24 -	28 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	6 -	7 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>02-1818</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.					
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>					
 _____ Signature			Dated: <b>May 11, 2005</b>		
<b>Thomas C. Basso</b> <b>Reg. No. 46,541</b> <b>Bell, Boyd &amp; Lloyd LLC</b> <b>P.O. Box 1135</b> <b>Chicago, Illinois 60690-1135</b> <b>Phone: (312) 807-4310</b>			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on May 11, 2005 (Date)  _____ Signature of Person Mailing Correspondence <b>Heather Foster</b> _____ Typed or Printed Name of Person Mailing Correspondence		
CC:					